The Simple Truth

FOR

Boys and Parents

HQ
36
M277s
1918

CHARLES C. MANGER, M. D.

Third Edition

HQ 36 M277s 1918

02410660R

NLM 05016319 7

NATIONAL LIBRARY OF MEDICINE

SURGEON GENERAL'S OFFICE

LIBRARY.

ANNEX

Section

No. 113,
W. D. S. G. O.

No. 232852.

9—513

THE SIMPLE TRUTH

FOR

BOYS AND PARENTS

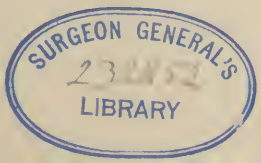
BY

CHARLES C. MANGER, M. D.

Professor of Nervous and Mental Diseases
Formerly Professor of Physiology
College of Physicians and
Surgeons, University of
Southern California

THIRD EDITION

LOS ANGELES, CALIFORNIA
1918



HQ
36
M277s
1918

Wishing that it may fulfill its purpose in their quest for knowledge, this book is dedicated to my little boys, Charles, William and Robert.

It is my fondest hope that they may grow to lead honest and clean lives.

FATHER.

AUG 23 1918

Copyrighted, 1918
C. C. Manger, M. D

©CLA501522

20,2.

FOREWORD

This little volume, with its well-considered and carefully presented information about a subject about which so little that is correct is generally known, has a larger field than is indicated in the author's touching preface. It should appeal with special force to parents and to all who are entrusted with that most sacred of human charges, the care and training of the young.

The body is not a thing to be ashamed of, nor are any of its organs or functions, when rightly understood, so unworthy as to be looked upon with contempt. Yet, even in the most enlightened homes, boys and girls are growing up with utter lack of knowledge which would conduce both to their safety and happiness. Vice and suffering are the inevitable harvest. A child can not be expected to control what it does not understand.

Much is heard of the duty of child to parent, but comparatively little of the duty of parent to child, particularly in connection

with the subjects herein discussed. The child that grows into adolescence without having heard the story of its physical life, told at the proper time, in the proper way, and by the proper person, has just cause to feel that in a most important sense he or she has been the victim of cruel neglect.

When this duty is recognized and accepted, the tragedies of youth, so pitifully familiar in every community, will become far less common, and the great aggregate of humanity's heartaches be correspondingly diminished.

A. B. COOKE, A.M., M.D.

CONTENTS

Introduction

I. Anatomy

II. Physiology

III. Pathology

- Masturbation
- Varicocele
- Gonorrhea
- Chancroid
- Syphilis
- Prostitutes
- Perverts

IV. Conclusion

V. Supplementary

INTRODUCTION

The healthy mind thirsts for knowledge.

Ignorance and error are the authors of most of our woes.

There is no other province of human experience, where the knowledge held is so much involved by ignorance of facts, and prejudice of opinion, as in the field of sexual problems.

Much has been done, and much has been written to clear away the darkness, but there seems to be yet more need for diffusion of light, that it may reach those who most need to know how to pass the "Rocky Shoals of Puberty."

A sensitive plastic being, just leaving the security of childhood, enters upon the rough and uncertain way of a new existence; surprised and dismayed by the shock of reality, his reason eagerly seeks after knowledge of his being.

As **secrecy is the soul of pruriency,** that is the time of all times when the truth may

protect him from vicious influences of erroneous and evil advice, with which he is all too apt to be beset.

This book is written upon the theory that the simple truth, free from the cold comfort of asceticism or the blighting cynicism of the vulgar, and without any of the restrictive conditions of formal morality, given from the viewpoint of the physiologist and physician, will be the most effective form of message.

Strange as it may appear to some, there is contained nothing which could conflict with religious or philosophical convictions.

Whatever is presented as statement of fact, has passed acceptance by all authorities; anything about which there could be dissenting opinion has been omitted.

Whatever is set down as matter of opinion has been drawn from my own observations, my experience as physician, and a critical review of the opinions of others.

In presenting this little volume, I indulge no pride of performance, nor hope of financial gain.

The motives actuating to this pleasant

task reach back to the stormy years of fifteen to seventeen in my own life, when the net result of researches in pamphlet, book and lecture upon the subject matter of this volume, was a very definite promise of the asylum on one horn of the dilemma, and perdition on the other.

So when (with more luck than discretion), I got "over the top," the desire was fixed in my heart to help others get the truth at an age when it would do them the most good. And now, with thirty added years of experience, that desire grows insistent—and here is the book, for what it is worth.

C. C. M.

Los Angeles, March, 1918.

TO PARENTS AND TEACHERS

The highest privilege in life is to be a **parent**; the next highest is to be a **teacher.**

When the message carried in this booklet was originally sent out under the title, ". . . For Boys of Twelve and Over," it was with the hope that it would also reach parents and teachers, who might find it useful in instructing the young.

Acting upon suggestions from numerous commentators, a more direct appeal is made to parent and teacher; and, in conformity, the title now reads, ". . . For Boys and Parents."

The individual is a product of the fusion of two **germ cells,** the **spermatozoon** from the father and the **ovum** from the mother, each supplying one-half to the traits and qualities of the offspring. The sum total of these qualities constitutes the **inheritance** or **heredity** of the new being.

All cells of the new body, excepting the germinal cells, undergo radical changes in

form and function very early in the life of the embryo, developing into various structures as bone, muscle, gland, nerve, etc.; each with a specific role to perform in maintaining the life of the organism.

The **germinal cells** are the only cells which do not undergo change in form and function in their transmission from parent to offspring; they ever remain the same in character, and their sole purpose is **reproduction.** Generation follows generation, the germ cells carrying the **characteristics** of the **species** on and on in **immortal chains** of which each succeeding individual becomes a **link,** representing the **hereditary** product of his **ancestors.**

All that anyone possesses solely and alone is **his own body,** of which the **mind** is the highest expression of function of that complex organism.

Needless to dilate upon the folly of neglect or abuse of that sacred trust.

The individual does not live for his generation alone. In all normal beings there is a natural **urge for offspring,** which is independent of the momentary sexual impulse.

To have this instinct satisfied, being the

greatest of **privileges,** also imposes the most sacred of **duties.**

The obligation is twofold: the parent owes it to posterity—**first,** to pass his contribution of the immortal germ substance on to his offspring in the healthiest possible condition; and to use discretion in choosing the mate who will share the responsibility.

The **second** obligation is to **protect the offspring** in all things pertaining to **environment, training** and **education,** to the end that he may make the most of **his hereditary endowment,** and in turn impart **improved qualities to the immortal chain of heredity.**

It is plain that the individual **link** in a succession of individuals is the product of **heredity,** and of the influence of **environment, education** and **training;** and that **evolutionary changes,** while slow, are, nevertheless, certain to take place; therefore, it is everyone's natural obligation to strive for **improvement of the race,** by conserving what is desirable and eliminating undesirable traits and qualities from the **stock.**

July, 1918. C. C. M.

I. ANATOMY

MALE ORGANS

The genital or sexual organs of the male are as follows:

Penis, prostate gland, seminal vesicles, vas deferens, testicles. (See illustrations.)

These structures grow considerably about the time of puberty, and attain full size at maturity.

The **penis** may vary in size, but not always in proportion to the size of the individual. It is therefore to be considered normal, unless either extremely large or small.

It is made up of muscular and fibrous tissue, and has specially constructed blood vessels and blood spaces.

The end, or head, called the **glans** is supplied with nerves of special sensibility. The glans is naturally protected by a pouch of skin lined with mucous membrane, which is called the **prepuce** or **foreskin.** It is this

part which is cut off by the Jewish people as a religious rite.

The operation is known as **circumcision**, and as it serves to promote cleanliness, is often performed for hygienic reasons. Sometimes it is a necessity, when the prepuce is tight or too long, etc.

Passing through the middle of the penis from its end to the bladder is a collapsible tube called the **urethra**, through which the urine is voided. It is about eight inches long.

The urethra is lined with a delicate mucuous membrane, and many little glands open into it; this structure becomes of great importance in certain diseases or afflictions.

Surrounding the urethra are several muscles, and also the **prostate gland.**

The prostate gland is situated around the neck of the bladder, which is the beginning of the urethra.

The prostate gland contains much muscle, and is about an inch to an inch and a half wide, an inch long, and weighs about three-fourths of an ounce. It has a dozen or more little ducts opening into the urethra.

This **prostatic portion** of the urethra is also spoken of as the **posterior urethra,** being marked off from the anterior part by the cut-off muscle which surrounds the urethra.

Opening into the posterior urethra are the **ejaculatory ducts,** one on each side. These ducts are simply the terminal ends of the vas deferens, and they also connect with the outlet of the seminal vesicle on each side.

The **seminal vesicles,** each about two and a half inches long, are tube like sacks, lined with a secreting mucuous membrane. They rest against the neck of the bladder. Each vesicle communicates through its opening with the ejaculatory duct.

The **testicle** is a complicated gland structure about one and a half inches long, one inch thick, and weighs three-fourths to one ounce. Its outlet tube is altogether more than twenty feet long. The first twenty feet is a very small tube folded and doubled into a bunch, which forms a mass closely attached to the testicle, and this mass is known as the **epididymis.** As this tube continues away from the testicle it is called the vas

deferens. This part of the outlet tube is larger than that which makes up the epididymis.

The **vas deferens** is about one-eighth of an inch thick, and runs a distance of sixteen or eighteen inches, to terminate as the ejaculatory duct, which opens into the posterior urethra.

The entire tube above described is lined by **mucuous membrane.** In fact all cavities and tubes of the body, which are in direct or indirect communication with the exterior, are lined with mucuous membrane.

The **testicles** are suspended in the scrotum by the **spermatic cord,** which is a collection of arteries, veins, nerves, a muscle (cremaster), and the vas deferens.

Of course, going to and coming from all the organs and structures described, are blood vessels, lymphatics and nerves in rich supply; therefore, much pain may arise from any disorder or injury of these parts, and slight causes will produce congestion or inflammation.

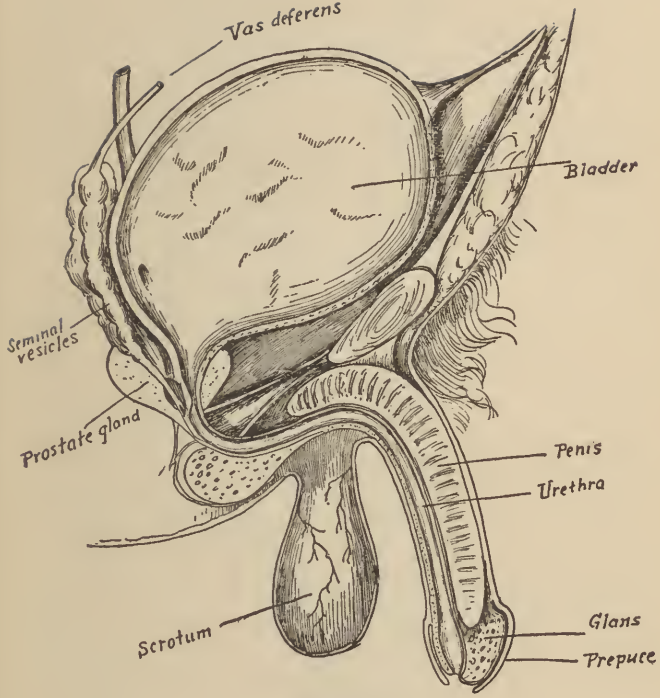

Vas deferens
Bladder
Seminal vesicles
Prostate gland
Penis
Urethra
Scrotum
Glans
Prepuce

Plate I

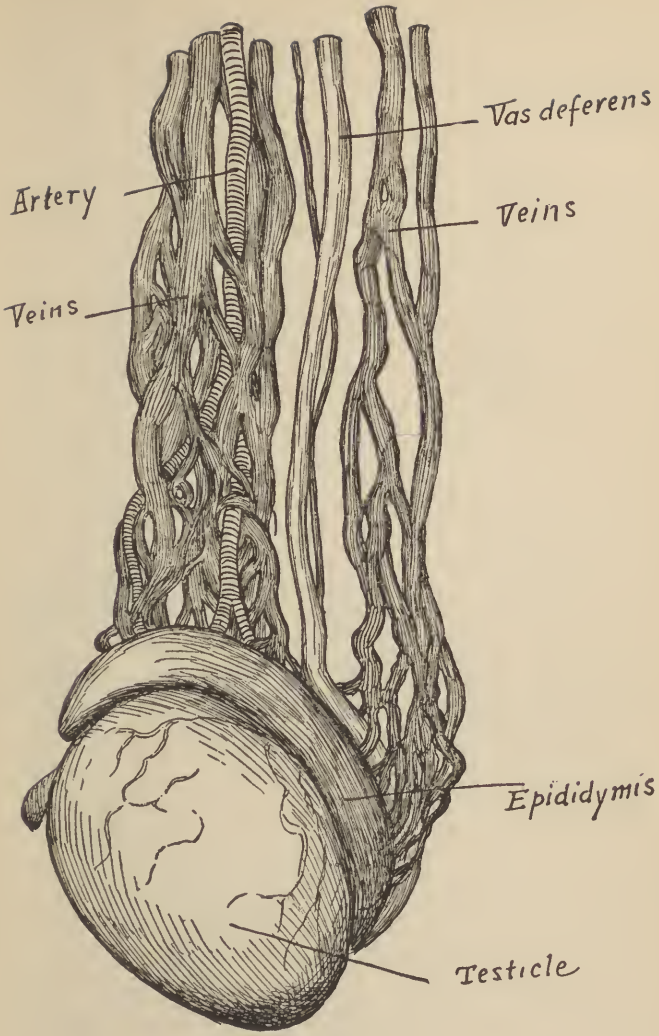


Plate II

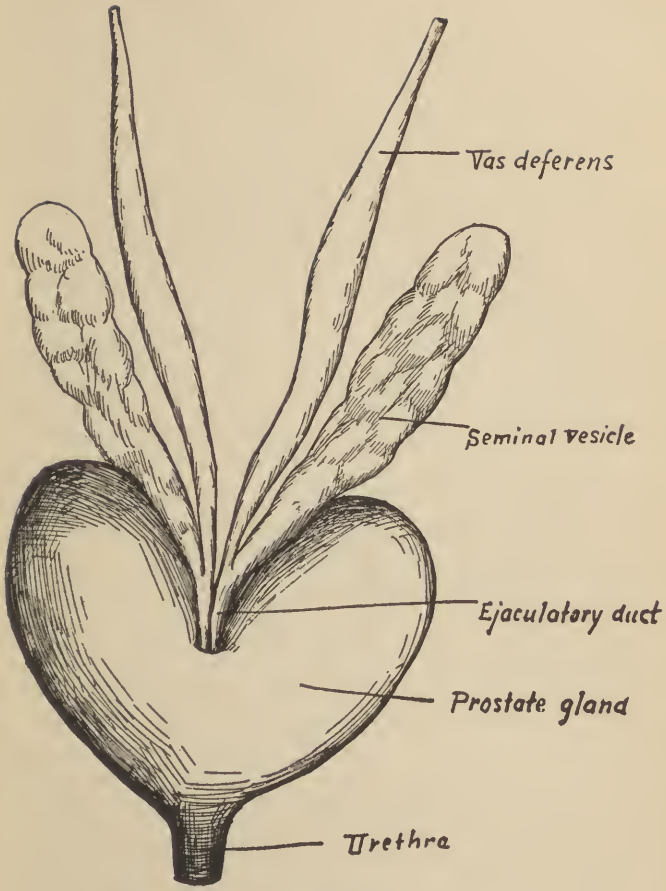

Vas deferens
Seminal vesicle
Ejaculatory duct
Prostate gland
Urethra

Plate III

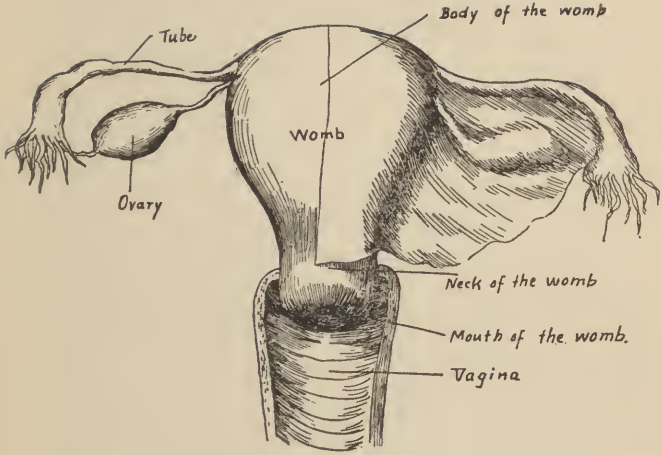

Body of the womb
Tube
Womb
Ovary
Neck of the womb
Mouth of the womb.
Vagina

Plate VI

FEMALE ORGANS

The **female organs** are as follows:

Externally, the clitoris, labia majora, labia minora, or nymphae, and the hymen.

Just above the entrance to the vagina is the opening of the **urethra,** which is a membranous canal about one and a half inches long; it leads to the bladder.

Internally, the vagina, erectile bodies, uterus, fallopian tubes, ovaries. (See illustration.)

The **clitoris,** and erectile bodies (one on each side just within the vagina and hardly noticeable), are composed, like the penis, of muscle, special blood vessels, and blood spaces, and nerves of special sensibility.

The **hymen** is a fibrous fold of mucuous membrane attached around the margin of the opening to the vagina, and partly closes this opening; in virgins, the opening is, usually, small.

An intact hymen is not an absolute certificate of virginity; on the other hand, an irregular hymen, or one having a large opening, does not necessarily mean defloration.

The **labia** are sometimes enlarged.

The **vagina** is a large collapsible tube, about four inches long at its posterior wall, and is lined with mucuous membrane. Its inner end surrounds and closes about the open, or cervical (neck), end of the uterus.

Many little glands open into the vagina.

During pregnancy the walls of the vagina become thicker and the cavity larger, to accommodate passage of the child. After the child is born the structures soon return to their former condition.

The **uterus**, or womb, mostly of muscular tissue, is pear shaped, about three inches long, two inches wide and one inch thick, weighs about one and a half or two ounces, and has a cavity lined by mucuous membrane.

Numerous glands also open into the cavity of the uterus.

It is remarkable that the pregnant uterus may grow to weigh two or three pounds, and after the child is born, return in a few months almost to its former size.

In old age it becomes small and fibrous.

The **Fallopian tube,** one on each side, connects the cavity of the uterus with the **fimbriated** end of the tube, which end lies close to the ovary.

The tube is about four or five inches long and about one-sixth of an inch thick.

As is the case in the vas deferens, the canal of the tube is small.

The **ovaries,** one on each side, are specialized glands about one and a half inches long, three-fourths of an inch wide, and one-third of an inch thick. They have no outlet tube, but by a curious arrangement, the **fimbriated** end of the Fallopian tube clasps partly around the ovary, so that the eggs which have matured in the ovary and broken through the surface, may be passed along to the uterus.

Accidents rarely happen, whereby the egg, before entering the Fallopian tube, is fertilized by a spermatozoon, and then the baby grows within the abdominal cavity. A more frequent accident occurs, in which the fertilized egg remains within the tube and grows until rupture of the tube takes place, when the mother may die of internal hemmorrhage.

The **mammary glands** or breasts, too, should be considered as belonging to the sexual organs—in the male these are rudimentary and do not functionate.

II. PHYSIOLOGY

There are four primary instincts so well developed in us that all of our activities center about them.

They are: 1. Instinct of self preservation; 2. Instinct of nutrition; 3. Herd instinct; 4. Sexual instinct.

The **sexual instinct** is vaguely developed in the young, and not having any definite or strong manifestation, usually should give no trouble.

This is true until one approaches the age of **puberty**, which begins between the ages of twelve and fifteen, in temperate climates, though it may be earlier or later than that, and yet be normal.

Puberty does not begin abruptly, but develops gradually and is marked in both sexes by increased rate of growth, particularly in the size of the sexual organs; appearance of hair upon the pubes; changes of voice; and by other profound changes, both mental and physical, in the whole make up of the individual.

The one change most important for our present purpose is the increase and development of the **sexual impulse** or feelings of passion. This feeling becomes more and more definitely fixed upon the sexual relation with the opposite sex.

The events which mark the stage of development at which the individual is capable of performing the sexual act and becoming a father or mother is, in the female **menstruation,** and in the male the power of **ejaculation.**

Menstruation is a normal occurrence of bleeding from the uterus. It takes place about every twenty-eight days, and continues for a few days.

When **pregnancy** takes place menstruation ceases, and does not occur through all the nine months of pregnancy. As a rule it does not appear again until the baby stops suckling the mother's breasts, although it sometimes comes on during the period of suckling.

Menstruation first appears at about twelve to fifteen and ceases at about forty to fifty years of age.

This cessation, also a gradual process, usually extends over a few years of time and is spoken of as the "**change of life.**"

Ejaculation in the male means a discharge of nervous energy accompanied by a rythmic expulsion of seminal fluid through the urethra. The whole process, with the accompanying feelings, is called the **orgasm**; and is in reality the terminating phase of the sexual act.

The orgasm occurs also in the female, with rythmic contraction of vaginal and uterine muscles and an increase of gland secretion.

The power to have **orgasm** appears at puberty and may continue to old age, especially in men; intensity begins to diminish about the time corresponding with the "change of life" in women. Individuals differ widely in this respect, as they do in every feature of the things pertaining to sex.

After boys and girls reach the beginning of puberty, even under good surroundings and living a clean life, they are apt to become sexually excited, on account of the very natural tendency for the powerful **sexual instinct** to assert itself.

Sometimes the sexual orgasm occurs spontaneously or during sleep (wet dreams); this is perfectly normal, unless for some special reason, it takes place very often.

Within **reasonable** bounds the feelings of sexual desire which all young people experience, and which, at times become very difficult to control, are perfectly normal.

This whole matter is controlled mostly by one's physical organization, habits of life, mental occupation, associations, etc.

It is manifestly impossible for people, even the most favored, to attain that environment in life which would accord with theoretically perfect circumstances for safeguarding the young against unhealthy manifestations of the sexual instinct; so that the **actually existing circumstances must be met.**

It is well to bear in mind that the period of puberty growth and development is not completed when menstruation or ejaculation first appear, but that several years (three, five or more) are required before the individual is fully enough developed to be considered a mature man or woman.

While capable of reproducing their kind

as soon as menstruation or ejaculation appears, offspring produced at this period would not be so vigorous, and the strain upon the young mother would be greater.

Besides, much coitus (or much masturbation) before completion of the period of puberty development, interferes with the perfect development of the individual.

For the purpose of **reproduction** there is developed and secreted by the **testicles** a thick fluid in small quantities, a drop of which contains many thousands of special minute germ cells called **spermatozooa.** They are composed of a head 1/6000 inch in diameter, and a long thin tail which causes slow movement not unlike that of tadpole or wiggle-tail. It is the smallest cell of the human body.

This fluid is forced through the vas deferens to join with the fluid secreted by the seminal vesicles, and stored there; during the sexual act the mixture is forced into the urethra through the ejaculatory ducts.

From there, being further mixed with some secretion from the prostate gland, it is finally expelled through the urethra, and is known as **semen.**

The **semen,** when deposited in the vagina during the sexual act, enables the spermatozooa to wiggle their way into the uterus, or even to the Fallopian tubes; and there, meeting the egg cell, one spermatozoon (seldom more) enters the egg which is thereby **fertilized.**

This **impregnated egg,** by reason of contraction of the tube, and movement of hair-like processes in the tube, is slowly carried into the uterus: here it becomes implanted in the uterine wall, and rapidly grows for a period of nine months.

At the end of this time the fully developed baby is born into the world by powerful contraction of the muscles of the uterus and abdomen.

The **ovum** or egg cell, 1/125 inch in diameter, is the largest cell in the human body. It is developed in the ovary and passes through the fallopian tube to the uterus.

It is estimated that 70,000 ova may be developed in a woman during her sexual lifetime; that is between puberty and the menopause (change of life).

The **ovum** could not grow into a new being except it be fertilized by the sperma-

tozooa from the male—therefore two sexes are necessary for the propagation of the race.

The **sexual act** itself consists of two stages—1. The stage of **tumescense—congestion** or **erythism.** 2. The stage of **detumescense** or **discharge.**

The **nerves** of **special sense** going to the **glans penis,** and also to some extent the sensory nerves to the urethra, and other sexual organs and structures, are easily excited by contact, fondling, or friction. (The clitoris and erectile bodies in the female are subject to the same thing.) The nerve impulses thus arising are carried to the **sexual centre** in the **spinal cord,** as well as to the **brain,** and so cause **stimulation** of these **centres.**

Impulses from the brain, such as voluptuous or sensual thoughts, also stimulate the sexual centre in the cord powerfully; and, at the same time, heighten the sensitiveness of the special sense nerves in the glans.

By a **nerve centre** is meant a region where various nerve fibers, or tracts, terminate; and where the impulses conveyed by these various fibres, or tracts, exercise their effect. From such a stimulated centre, new impulses

are sent to the organs, or parts, which are to functionate.

The **primary sexual centres** are in the **spinal cord.** Other centres, having a less direct influence upon the sexual organs, are located in the **brain.**

A nerve centre, once it is stimulated, operates its function more or less reflexly; that is, without direct control of the will.

Therefore any **mental stimulus** arising in the brain, or any stimulus arising from irritation of the nerves of the sex organs or structures will result in **stimulation** of the **sexual centres,** awaken sexual desire, and so cause appearance of the **first stage** of the sexual act, viz., **tumescense.** Hence, the advisability and wisdom of controlling thoughts, and external influences which tend to promote tumescense. An ounce of **prevention** here is worth several pounds of cure.

Tumescense means congestion of the sexual organs, erection, activity of the various glands, heightened sensibility of the parts, and a concurrent highly voluptuous state of the feelings.

By a gland is meant an organ that is made

up of various tissues; of blood vessels, lymph vessels, nerves, etc., but the essential tissue is the cells whose **special function** it is to prepare and pour out fluid substances which are called **secretions.**

Gland activity, like muscle contraction, is under control of nerves.

Examples: **Saliva** from the Salivary glands; **bile** from the liver (which is the largest of glands); **digestive juices** from the glands of the stomach and intestines; and **semen,** which is a mixed fluid, from the testicles and other sexual glands.

It is well to recall how the flow of saliva is very greatly increased by the taking of food; also that the sight of food, or the mere thinking of food will cause the "mouth to water." So, also, secretion by the sexual glands is greatly increased by sexual activity. Licentious mental indulgence alone, causes marked increase in the secretions of the sexual glands.

In a mild state of tumescense erection may not occur, or develop only partially. But if excitement continues, or is great, full erection occurs and tumescense is complete.

Erection is due to contraction of muscles of the penis, and to its distention by accumulation of large quantities of blood, which is temporarily retained in the veins by contraction of muscles upon the vessels of return flow.

It is quite natural that once in the state of tumescense, it becomes more and more **difficult** to **control** the passions, or overcome the tendency and desire to complete the sexual act. And it is also a most trying situation to continue a long time in this state of excitement.

The **second** or **stage** of **detumescense** or discharge—means the attainment of the climax of sexual excitement which terminates in the **orgasm** accompanied by a marked pleasurable thrill of relief.

The orgasm is brought on, **normally**, by sexual intercourse (also called coitus, copulation, etc.), or by spontaneous reflex (as nocturnal emissions). **Artificially**, it is brought on by masturbation or other unusual methods.

The **second stage** of the normal act requires but a brief time, a few minutes, for

its accomplishment; but the first stage may be prolonged over more or less time, or be often repeated without being followed by the second stage.

Such practice of unduly prolonging tumescense, however, is not healthful and, if persisted in to any great extent, may become a serious menace to health and happiness.

In the act as performed **normally,** when a high state of tumescense has been reached, the second stage is entered—this consists of introduction of the penis into the vagina (intromission); the contact and friction, together with libidinous mental pictures, causes rapid violent discharge of nerve energy through the sex centres, and culminates in the orgasm.

III. PATHOLOGY

MASTURBATION

Masturbation, also called onanism, self abuse, etc., means the practice of causing sexual excitement, and the orgasm, by various methods, involving:

1. Irritation of sex organs, but particularly the nerves of special sense in the glans penis (the clitoris and erectile bodies in the female); 2. Indulgence in voluptuous and sensual mental pictures.

Ordinarily, masturbation is thought of as the accomplishment of the **second stage,** or detumescense, only; but it really includes indulging in the **first stage** of the sexual act (described in Chapter II) as well.

The very common method pursued is to cause contact and friction by manipulating the penis (in the female the clitoris and erectile bodies) with the hands; while at the same time fixing the thoughts which stimulate sexual feelings.

Any method of contact or friction, accompanied by suitable thoughts, may accomplish the same thing.

Indeed if one only gives oneself up to orgies of lustful fancies it is to be considered **masturbation,** even though excitement may not reach the height of bringing on an orgasm. This is known as **psychic** or **mental masturbation.**

It cannot be **emphasized** too much, that the influence of **thoughts** upon the **sexual centres,** with consequent **sexual excitement,** is extremely **important;** for it is the indulgence of fancy in imaginary sexual situations and performances which, more than anything else, leads to tumescense, accompanied always by the more or less imperative feeling or desire for relief; or else leads to actual completion of the sexual act by copulation, or by masturbation.

The **sexual impulse,** also, becomes harder to control the more the tumescent state is permitted to recur; for, naturally like other functions or habits, it grows with repetition or cultivation.

It should be well understood that occurrence of sexual feeling or excitement is not

entirely within control of the will; that the sexual instinct asserts itself more or less, according to the individual, by reason of the fact that this is natural.

In the **female** the period of greatest tendency to **sexual unrest** and excitement is around the time of the **menstrual period.**

In the **male** there is no **regular** period for such manifestation, and the passion is apt to be more urgent than in the female.

It is important to know that, normally, sexual excitement is **not** a **constant** manifestation, but it comes in **periods,** with inter-

Some have the idea that a healthy person vening time between the periods during which the passions are more or less **quiescent.**
should be always in a condition of sexual readiness, but that is not **natural.**

Those who sustain a condition of readiness or mild excitement by harboring sensual thoughts, or pursuing exciting practices, **injure** themselves thereby.

Even admitting the foregoing facts, it is true that by **right living,** and **correct mental** and **physical habits,** one may restrain the

manifestation of sexual passion and desire to its legitimate channels, although at times it may tax the will in spite of the ardent wish to win.

The power of **erection** is present in **infancy,** and manipulation of the sexual parts will arouse vague pleasurable sensations.

The **child** will not take to sexual habits unless, as often happens, there is some **irritation** of the **genitals,** such as may be caused by a tight prepuce, improper dressing, neglect of cleanliness of the parts; or by chance **communication** with other children who have learned.

Sometimes **ignorant,** or **vicious, older people** teach children the practice of playing with their parts.

Even though they do not have well developed passions and are incapable of having orgasm, the practice in **effect** is essentially the same as **masturbation.**

Children should be carefully **protected** from the practice of **masturbation,** because it is **harmful** to them for various reasons:

If persisted in the practice will cause the child to arrive at the pubertal period **earlier**

than it would naturally; the **stability** of the **nervous system** will be **impaired**; the child's **general health** and **vitality lowered**; and the **difficulties** of the **pubertal period** will be much **increased.**

Ordinarily, with the sympathetic care that parents and friends could (and should) exercise over a boy or girl, the period of puberty is reached, without their having been given to masturbation.

Upon reaching **puberty,** many will experience **orgasm** for the first time as a result of unintentioned friction, as for example in riding, or during sleep in "wet dreams"; before they have ever manipulated the genitals sufficiently to bring on the crisis (orgasm) of the sexual act.

Others, under the tuition of **older companions** will, perhaps after repeated efforts, finally succeed in producing an orgasm.

After **starting** the **practice** it is so **easy to drift** into **repetitions,** because the passions grow stronger with indulgence, and thus the thing tends to become established as a **habit.**

By **moderate masturbation** is meant not more than about two or three times in a couple of weeks; with periods of **lesser fre-**

quency, depending much upon the individual and circumstances. More than that verges into excess or habit of masturbation.

By the habit is not meant the rare or even occasional yielding to a burning desire to get relief by masturbation, but it means that condition where one commits the act often; and more than that, also frequently resorts to awakening the passions by lascivious reveries, and by fondling the parts, in order to arouse the passions; and then, having produced the passion, usually continues the practice until orgasm takes place.

Those are the conditions or practices, which really constitute the habit of masturbation.

Occasional masturbation as mentioned above, or the habit of masturbation, is oftenest started at about the time the power of orgasm has developed, and is apt to grow upon one during the balance of the period of puberty, which lasts altogether several years.

It may be, and very often is, continued right into manhood. In exceptional cases it is even practiced after marriage.

Through advice, or a conviction that it is

not the right thing to do, a good many boys after practicing masturbation for a time, perhaps for several years, will learn to control themselves to such an extent that they may do it but seldom, or not at all thereafter.

On the other hand, there are many who have a disheartening struggle trying to keep from masturbating when passion is once aroused; they feel that they have failed because in spite of everything, they will yield now and again.

It is this large class of boys who **worry** about it most, and, **fearing** that they have been **irreparably injured,** are plunged into all degrees of self reproach and are unhappy much of the time. **Most** of this trouble is due to the fact that they do not know the **truth** about their functions.

What has been learned is conflicting, or mostly erroneous. Worst of all, the erroneous knowledge gained is tainted by **vicious teachings** and suggestions.

Or else the **severe moralist,** or **overzealous teacher** does much to scare the very life out of a boy, in order to help him, or prevent him from going astray.

This is done with every good intention, but it is wrong, and violates the principles of defensive mental mechanisms; so that, instead of getting help, the boy suffers unnecessary pangs of self reproach, remorse, and may drift into a more serious nervous condition; not so much because he masturbated as because he worried about it.

A large share of harmful misinformation upon sex subjects is contributed by advertising quacks and quack writings; all of which are published for the sole purpose of cajoling or frightening the uninformed into paying money for treatment of imaginary ills.

Under no circumstances can one depend upon the advertising quack "doctor" no matter what or how plausible his claims may be; he is after the money first, last and all the time.

The question as to what effect masturbation has upon the individual arises in every mind, and it is of very great importance that the answer to this question be given with scrupulous regard to the simple truth, unprejudiced by preconceived notions of abstract right and wrong, or bias of personal

opinion; but solely according to the **laws of nature.**

It is variously estimated by those who study the subject, that of all **males, ninety** to **one hundred** per cent will sooner or later, **masturbate.** The true proportion will be somewhere above ninety per cent.

Among **females** the percentage is probably not so high.

Proper knowledge imparted more generally and early in life would greatly reduce the percentages.

The above being **true,** it would seem that the average man or woman could not have been much hurt by masturbation.

It is just about this question that opinions are so conflicting and misleading.

For instance it is held, and preached, without any qualification, by many (who are not well informed), that masturbation leads **inevitably** to a host of **evil consequences**; such as organic nervous diseases, wasting, weakness, loss of manhood, insanity, and so on.

Such statements are as harmful as they are inaccurate.

It is true that many of the insane do masturbate excessively—but this is a result rather than the cause of the mental condition.

Masturbation may sometimes be a contributing causative factor in mental breakdown, in such cases as were already predisposed to insanity.

And again it is asserted, that the very **loss of semen** is weakening and a great drain upon the life blood and vitality.

The **facts** are, that the semen is a product of **gland secretion** which is **normally** produced to some extent even under circumstances of absolute **chastity**; and, furthermore, its production and loss, within wide limits of reasonableness, is not in the least injurious.

After it is secreted it cannot be utilized by the body but must be voided, and nature provides normal ways, viz., copulation, and spontaneous or nocturnal emissions.

Then again widely current statements and belief have it, erroneously, that the masturbator shows many **signs** and **symptoms** which any observer can recognize. Pallor,

hollow eyes, wasting, weakness, cowardice, clammy skin, loss of memory, pimples, unsociability, and many others are given.

The truth is that not even a skilled specialist would be so bold as to lay claim to infallible ability to separate those who masturbate from those who do not.

It is also true that many who masturbate may be athletes, bright scholars, full of life, rosy cheeked, and fight at the drop of the hat. This does not prove that they are so **because** of **masturbation,** but **in spite of it.**

TO SUM UP

Masturbation before puberty is always more or less harmful and may be seriously so.

Masturbation in moderation after puberty begins, cannot in itself, be permanently injurious to any **great** extent. The **chief injury** in such cases will be the result of worry, feelings of **shame** and loss of **self-respect.**

The injury, even tho not **great,** is a positive loss, and should be avoided.

Masturbation to excess is always injurious, more or less, depending upon the individual concerned.

Masturbation, even in a moderate degree, if **continued over many years** to the exclusion of normal intercourse, will have the same effect as masturbating to excess.

Masturbation can do no one any good. The individual would be **at least a little better off,** if he never masturbated; which is sufficient warrant for condemning the practice.

It cannot be emphasized too much that exercise of the sexual function is not a neces-

sity to full growth or good health. In fact, nature's plan does not contemplate the use of this function before the being is fully developed; and this is not attained until about the time marriage should, properly, be considered.

Theoretically, a reasonable amount of sexual intercourse indulged after completion of the pubertal period, or full development, would conduce to the fullest enjoyment of health, vigor and contentment.

In practice, this cannot be carried out perfectly, because two people are directly concerned; many contingencies will arise; and society in general is inseparably interested in the regulation and control of the sexual instinct.

Therefore, just as we all must struggle against many obstacles, in getting a living and a place in the world, so all must be prepared to struggle for a reasonable control of the sexual instinct, in order to conform to law and present custom.

It sometimes runs counter to the pure dictates of nature, but there is no way around, we must make the best of the situation for the good of all.

And let it be **remembered** in connection with sexual problems, that you **cannot get something for nothing.** He who tries will **sooner** or **later come** to **grief** and have to pay the **penalty.**

The next question is **how to avoid starting to masturbate,** or having started, **how to stop it.**

Only general principles can here be mentioned.

From **infancy,** care should be exercised, that the sexual parts be kept as clean as the rest of the body. However, daily attention is not necessary and might prove meddlesome.

The foreskin should not be tight.

Strictest regard should be had to the **character** of **playmates, associates** and **servants.**

Watch children constantly and gently counteract any tendency to manipulate the genitals.

Dress them sensibly for comfort.

Avoid feather beds or too much cover at night, but use enough for comfort; especially to keep the lower limbs warm.

The bladder should be emptied just before going to bed.

One should not lie abed long after awakening in the morning.

Give wholesome food and enough, but avoid overeating.

Plenty of healthful play.

Children should not be **overburdened with tasks** of any kind, nor **depressed** by a **too exacting discipline.**

Good example is the best teacher and corrective.

And **very important,** begin early to impose the habit of **regularly emptying the bowel each day,** that it may be kept up **during life.** This one thing is of **more value** than all the purgatives in the materia medica. The reasons are numerous and are so well understood by all physicians, that it is not necessary to give them here.

A good plan in fixing the custom of regular bowel movements is to go to stool right after breakfast, as then the taking of food has stimulated gastro-intestinal movements and secretion, which are naturally followed by evacuation if nature is given a chance.

As puberty is reached and progresses, **wholesome physical** and **mental occupation** becomes of prime importance. This includes **clean teaching, reading, diversions,** and, in particular, the right kind of **associates** and **companions.**

A **correct knowledge** of one's **own body.**

A reasonable amount of **wholesome physical occupation** together with responsibility is **nature's best preventive** and **remedy** for the undesirable manifestation of the sexual impulse.

Such exercise not only conduces to healthy, vigorous development, and inculcates the habit of constructive employment, but it uses up the surplus energy which **must find expression in some way**—and the experience of mankind proves that if one is not usefully employed, the tendency is always to follow instinctively what is immediately pleasurable—and the pitiable examples of blighted lives everywhere present, show with what results.

Common sources of the most powerful stimuli to sexual excitement and unrest are the dangerous practices of **spooning, hugging, kissing, improper dancing,** etc., in-

dulged in by some young people, with or without conscious purpose of attaining the inevitable result, viz., awakened sexual desire, and a more or less violent state of tumescence.

In truth such practices usually amount to performing the first phase of the sexual act, and it must be obvious to all that this may lead to grave consequences, aside from the fact that frequent repetition in itself would be harmful.

If masturbation has already been practiced, then the boy should **learn its true significance**, and be encouraged in every way by kindly, patient help and advice.

He should be impressed that, while the ideal would be total abstinence, he will be successful just in proportion to any **gain** he makes in controling himself.

And that if he can do no better than **minimize** the frequency, he does much.

And that after a while he will learn to gain complete mastery.

The truth and effectiveness of all this accords with experience among those who masturbate.

If the **habit** of **masturbation** should have become well established, and if one is sick, uncertain and discouraged, the best thing to do is to **consult** an **honest physician** who understands, inform him truthfully, then follow his advice. **Always avoid advertisers and other quacks.**

It is well to know that not only the habit of improper thoughts tends to perpetuate the difficulties of combating the practice, but that there may also develop a **chronic irritability** of the posterior urethra, wihch greatly tends to stimulate the sex centres to produce sexual excitement.

This irritability can be easily cured by proper management and application of remedies that any well informed physician knows.

Not every physician, otherwise competent, knows just how to deal with sexual problems, so one should not be discouraged if the first one consulted does not know exactly, or fails to afford help.

VARICOCELE

Varicocele is a condition, where the veins of the spermatic cord, which are within the scrotal bag, are enlarged. It usually occurs on the left side.

The condition first appears some time after puberty, and the mass may be noticed to increase in size for several years.

When handled, the mass gives one the impression of handling a bunch of worms.

There are several things which may aggravate the condition; such as **constipation,** and prolonged **congestion** due to sustained sexual excitement. It is perhaps primarily due to an inherent tendency of enlargement in the veins.

As a rule varicocele need give no concern, even when at times attention is drawn to it by a little discomfort.

In a limited number of cases, where the discomfort is annoying, or dragging pains persist (this usually happens after fatigue, or long standing on one's feet), a physician should be consulted.

A simple surgical operation cures any case permanently.

Quacks, who make much ado about varicocele, often causing unnecessary worry to the patient, should be entirely ignored and avoided.

In this connection, it may be well to know that the **left** testicle is larger than the right, and hangs lower in the scrotum than the right. It is surprising how this trivial anatomical fact has served to worry the uninformed and enrich the quacks.

VENEREAL DISEASES

There are three diseases peculiarly associated with the sexual organs, and disseminated in nearly all cases by sexual contact.

These venereal diseases are: **Gonorrhea**; **Chancroid**; **Syphilis** (lues or pox).

Here should also be mentioned that **crab lice**, body lice, and itch, are sometimes transmitted during contact.

Gonorrhea or **clap** is an infectious disease due to the presence of a germ called the Gonococcus, which is about 1/15000 of an inch in diameter, only visible under a high power microscope.

The disease shows in from **three** to **ten** days (usually five to seven) after contact, and develops with an **inflammation** of the mucous membrane of the **anterior urethra** (see anatomy), and a discharge of **pus**, or **"matter."**

It is painful, especially during the acute stage.

If it runs a favorable course the infection

does not go beyond the anterior urethra, and will be cured in five or six weeks.

Very many cases, through lack of proper care and treatment, will not run a favorable course. Infection then spreads to the **posterior urethra,** and may involve some or all of the sex organs and structures; thus becoming a very difficult condition to treat; often followed by **serious consequences,** not only at the time, but also in later years.

Not only the sex organs, but the **bladder** and **kidneys** may become affected by extension. **Bright's** disease of the kidneys is thought to be an occasional complication of gonorrhea.

The **prostate gland,** which is so important in its relation to the urethra, and outlet of the bladder, is frequently inflamed as a result of gonorrheal infection extending to the posterior urethra; becomes permanently enlarged; and is apt to cause a great deal of trouble.

Many such cases of enlarged prostate go on until late in life; when, finally, surgical intervention is necessary.

Not every case of enlarged prostate gland is due to gonorrhea.

The **epididymis** and **testicle** are sometimes involved in gonorrhea, and the function of supplying spermatozooa is apt to be lost.

When both testicles are so involved, permanent **sterility** is the consequence.

Poisons, or the **germ** itself, sometimes get into the general system, causing such things as **neuritis** (inflammation of nerves), **arthritis** (inflammation of joints), **endocarditis** inflammation of the lining of the heart), **meningitis** (inflammation of the membranes surrounding the brain and spinal cord).

The difficulty of treating the disease, when complications have set in or when it becomes chronic, is due to the circumstance that the germs get into the numerous little **glands**, and even enter the **cells** of the mucous membrane and glands, from which positions it is very difficult to dislodge them.

Therefore, although the disease may appear to be cured, the germs lie dormant for months or years, only to break out in activity anew at some unexpected time.

In that way **many** married women acquire the disease from the husband who thought he had been cured.

The disease in **women** is even more disastrous than in men, for it is very apt to spread to the **uterus** and **fallopian tubes,** and sometimes to the abdominal cavity, resulting in **abscesses** and **peritonitis.**

These conditions demand major surgical operations; either at the time of complication, or, as very often happens, after years of ill-health and sorrow.

Many such operations are done by all surgeons.

The **germ,** if conveyed to the eyes by contaminated hands, handkerchief, etc., causes violent inflammation which often results in **blindness.**

In fact, a large percentage of blindness occurring in infants (which means fifteen per cent of all blindness that occurs), is due to getting gonorrheal germs in the eyes as the child passes through the infected vagina at birth; the mother having previously been infected by the father.

It is a popular grave error to believe or say that a case of **"clap"** is no worse than a

bad cold, and the common saying that one is "not a man until he has had a **dose,**" is **most vicious.**

The **truth** is that most cases (under good treatment only) get well without serious consequences. But a very large percentage of all cases, thousands of cases annually, become complicated, and cause untold suffering and misery for the innocent as well as for those who might (and should) have avoided the disease.

If, through error or misfortune, one contracts the disease, there is but **one course** to pursue; consult an honest physician and follow his advice.

Under no circumstances should one rely upon drug store treatment, patent or **advertised medicines, quacks, or the suggestions** of **smart Alexanders who pretend to know.**

If any course other than submitting to treatment by a competent physician is followed, one will rue the day he tried it.

CHANCROID

Chancroid is a disease favored by uncleanliness, and probably caused by a germ known as the bacillus of Ducrey.

It appears as a sore or ulcer, sometimes called soft chancre, on the glans or prepuce, giving off serum and pus, and is painful.

It appears nearly always upon the penis, about three days after exposure.

As a rule, it occurs in more than one spot at a time, and may spread wherever the pus touches.

It may become most virulent, and eat away considerable tissue, leaving scars or disfigurements.

A frequent complication is **bubo** or "blue balls," which means abscess of lymphatic glands. Usually those in the groins are affected.

Chancroid is easily curable if cleanliness and proper treatment is followed.

This disease should not be confounded with chancre, which is vastly more serious, chancre being the initial sore of syphilis.

Hence the advisability of consulting competent physicians as soon as anything suspicious appears, for the purpose of learning immediately the exact nature of the disease, and receiving the appropriate treatment for it.

SYPHILIS

Syphilis is the most dreadful of diseases that afflict civilized man, and the least excusable one, because easily preventable by non-exposure.

It is probable that this disease existed in ancient times, although it is generally held that syphilis was unknown in the old world, until the sailors of Columbus brought it from the new world.

Its victims are legion. Quoting from Havelock Ellis, a noted English authority:

"The dangers of syphilis lie not alone in its potency and its persistence but also in its prevalence. It is difficult to state the exact incidence of syphilis, but a great many partial investigations have been made in various countries, and it would appear that from five to twenty per cent of the population in European countries is syphilitic, while about fifteen per cent of the syphilitic cases die from causes directly or indirectly due to the disease. In France generally, Fournier estimates that seventeen per cent of the whole population have had syphilis, and at Toulouse, Audry considers that eighteen per cent of all his patients are syphilitic. In

Copenhagen, where notification is obligatory, over four per cent of the population are said to be syphilitic. In America, a committee of the Medical Society of New York appointed to investigate the question, reported as the result of exhaustive inquiry that in the city of New York not less than a quarter of a million of cases of venereal disease occurred every year, and a leading New York dermatologist has stated that among the better class families he knows intimately at least one-third of the sons have had syphilis. In Germany eight hundred thousand cases of venereal disease are by one estimated to occur yearly, and in the larger universities twenty-five per cent of the students are infected every term, venereal diseases being, however, specially common among students."

Syphilis is caused by a microscopic animal called **treponema pallidum,** which lives in the blood and tissues.

It may be contracted by using unclean towels, common drinking cups, kissing, or in any way that will bring the virus which pervades the discharge from ulcers, or even minute wounds of the infected body, in contact with the blood of a healthy person.

Physicians and surgeons, in the course of necessary ministration, not infrequently have been infected in the hands from contact.

The infection probably cannot pass through the unbroken skin, which is the one thing that protects the balance of the one hundred per cent from getting syphilis.

The **usual** mode of contracting the disease is by **sexual contact.** In this country, perhaps ninety-five per cent of cases are so contracted. In Russia, according to one recognized authority, less than half of all cases are acquired by sexual intercourse.

Syphilis is manifested ten to twenty days sometimes longer) after exposure, by appearance of the **initial sore** which at first is a pimple, then soon develops into a **chancre.**

The **chancre** is a rather hard mass like a small button under the skin, and not very, if at all, painful.

It may ulcerate, or may disappear without treatment. This constitutes the **first stage.**

About **six weeks** after the chancre appears

the so-called **secondary** sores and symptoms appear, starting the **second stage.**

Headache, sore throat, eruptions, falling of hair, and many other signs are symptoms of the second stage, which may last for one or two years.

The eruptions, etc., come in crops at various times during this stage, and in many differing forms. The disease is most contagious during the first and second stages.

The **second stage** merges gradually into the **third stage,** which is characterized by larger and deeper sores, and may involve any or **all** of the **tissues** and **organs** of the **body**—such as the bones, liver, stomach, intestines, blood vessels, heart, lungs, glands, brain and spinal cord.

A so-called **fourth stage** means the late results, years after one stops treatment and after disappearance of all previous symptoms; ten, twenty, or forty years after one **thinks** he is cured.

At this late time appear such diseases as **general paralysis,** or **paresis**; and **locomotor ataxia.**

These two common conditions are practically always due to syphilis and to no other cause.

Locomotor ataxia is the commonest and most important of spinal cord diseases. Pains and difficulty in walking are prominent symptons. The sufferer soon becomes useless, growing gradually worse during the rest of his shortened life. There is little chance of a cure.

General paralysis, sometimes erroneously called softening of the brain, is a disease of all structures but especially of the brain; the outstanding symptoms are rapidly dementing insanity, terminating in death within a few years. No well developed case ever recovered.

Although paresis makes up but a small fraction of permanent diseased conditions due to syphilis, **ten** to **twelve** per cent of all cases of **insanity** admitted to hospitals are cases of paresis.

In addition to the other consequences of syphilis, there must be added countless cases of sterility, abortion and dead babies; numberless surviving defectives and weaklings

born of syphilitic parents to afflict the world, and suffer from it in turn.

In the light of fuller knowledge, and intimate observation of the manifold ravages of syphilis, one is appalled by this "Captain of the Men of Death."

If one should contract the disease, innocently or otherwise, there is but **one course** to pursue: consult reputable physicians, and follow their advice scrupulously.

It is thought to be **curable,** if treated **properly,** and over a **long time;** but at best, one who has been infected is never quite himself again.

All that has been said about the matter of proper treatment, and of quacks, in connection with gonorrhea, is applicable to syphilis; but it is far more important to heed the advice.

Venereal disease claims its victims in palace and hovel alike—without distinguishing between the innocent and the erring.

It is estimated by different observers that from **thirty** to **eighty** per cent of all men in the United States, sooner or later, contract some form of venereal disease.

About midway between those figures, or say fifty per cent, would be near enough the truth. And that is the most terrible truth of our social life.

The shame of it is that society has always frowned upon the truth, or turned an unheeding ear to those who would warn the world of these perils.

Even now the people are awakening but slowly to the realization that venereal disease is the greatest menace to the health of the race.

PROSTITUTES OR WHORES

Prostitutes are women who submit their bodies for hire.

There are many of them, especially in large cities, and they are numbered by tens of thousands in each of the largest cities of the world.

The common, **ordinary whore,** or street walking variety, is practically certain to become infected in a very short time with one or more venereal diseases.

The more careful and discriminating smaller class of prostitutes, or those who play mistress to one man (or more) at a time, are less apt to be diseased, although a goodly percentage are sooner or later affected.

The **"occasional"** whore, the **"private snap,"** or those who go in for this sort of thing mostly for the fun and excitement, are very sure to become diseased, as this class is notoriously careless and the least cleanly.

Most prostitutes are **mental** or **moral defectives,** although many do evince some good qualities of head and heart. However, be-

ing under the ban of society, and spat upon by even those who patronize them, they soon grow calloused in the finer sensibilities of the sex, and ignore absolutely the interests and health of others, so that they are perfectly conscienceless in spreading disease.

A most common form of deception resorted to by whores, for the purpose of getting "business," is to feign a lustful feeling of affection for the customer, and by every artifice try to beguile the hapless sucker to his ultimate sorrow.

It can be imagined what little chance one has of escaping disease, when in commerce with prostitutes.

As a purely business proposition, from the standpoint of profit and loss—dealings with lewd women are always a losing game.

The expected pleasures and benefits are many times over counterbalanced by the evil results.

Boasts often heard from the vainglorious of successful affairs and escapades with women may fill the uninitiated with envy and longings for similar experiences; but the day should not be praised till evening, for

in this particular business the morning **promise** nearly always turns to **penitence** before night.

The facts are that many of such boasts are made purely as a result of wish-inspired fabrications.

If the boaster tells the truth, he is at least betraying a confidence, and is a despicable creature; if he lies, he then maligns a woman and is a scoundrel.

Even if one should for a time seem to revel in a shower of feminine favors, nature and the world keep perfect books; they never omit to enter a debit, and inexorably exact full payment.

An **erroneous teaching**, which has influenced some in taking chance in the field of sexual adventure, is a belief in the efficiency of various contrivances and methods of prevention against venereal disease.

There is no perfectly safe way of prevention, except **non-exposure.**

The feeling of security in the use of any preventive method is sometimes the very means of leading one to acquire disease.

Another source of mischief lies in the false information conveyed by exhibits in drug stores, and advertisements in print, designed to impress one with the efficacy of various methods, or medicines, in preventing conception (pregnancy).

As was stated under prevention of disease, so again here; non-exposure is the only safe preventive.

Also, sometimes the thought is suggested that, even if conception has taken place, certain "remedies" would produce abortion.

No dependence can be placed in these "remedies"—any medicine powerful enough to be effective is extremely dangerous to use for such purposes.

Still another erroneous belief held by not a few people is that doctors regard such matters lightly, and will "help you out" by performing an operation.

This is not true. While some doctors do yield to pleadings of distress, or to the lure of lucre, most physicians are too self-respecting to become parties to a crime for hire.

Furthermore, many abortions, done even by doctors, result badly, and often end in **death.**

PERVERSIONS

Perversions now and then are encountered.

A **pervert** or **sexual degenerate** is one who derives sexual satisfaction in unusual ways, or by practicing unnatural methods.

Masturbation is not to be considered a perversion, unless practiced to uncontrolable excess, or in preference to the normal act.

Constitutional perverts or inverts are born with the taint. Perversions may also be acquired.

Perverts or inverts may have criminal tendencies in connection with sexual excitement, and often mutilation and murder has been done, in pursuance of their lustful attempts upon others. Therefore they are always to be classed as dangerous, and a menace to society for various reasons; even if only because of contamination of the young.

They should be severely shunned.

IV. CONCLUSION

The one purpose running through this book is to give a sane answer to the eternal question: **What is the best way to get the most good from the sexual endowment?**

In seeking for the answer, everyone experiences conflicting emotions, uncertainty of decision, and temptations to depart from the path marked out by teachers of morality, and social custom.

To be fair and truthful, it must be admitted that the outwardly approved custom does not always square with actual practice. And this is a perpetual source of perplexity to one just entering into the responsibilities of life, leading often to a wrong course.

The natural modesty of boys, as well as girls, is a strong barrier against immorality; but this barrier is too often penetrated by influences arising out of prurient hypocrisy, which is fostered by lack of true knowledge of sex in its social relations.

In conclusion, let me once again remind

the reader that illicit sexual commerce never pays, because:

If dealing with prostitutes or promiscuous women, whether for love or for money, venereal disease is the great overshadowing danger; but many other troubles also inevitably go with it.

If dealing with young girls, great wrong may be done, leading to possible dire consequences; and to compunctions of conscience long after the fleeting pleasures have been forgotten. Or else, as a result, be the girl innocent or not, one may be led to make a marriage against choice, which would be calamitous to one or both parties.

If the objects of desire be married women, remember that—He who invades the sanctity of a home, steals what is, usually, not worth the theft; and pursuing a vagrant fancy whose best promise is of little worth, must tread a perilous path at hazard with tragedy, which, when it wins, strikes all concerned.

So, in the fullness of experience, whether considered from the viewpoint of the gay Lothario of many escapades, the roue, satiated in a life time of sexual extravagance, the miserable syphilitic derelict, or the proud

father of a healthy family, there is only one logical ideal:

Live a clean, wholesome life, according to the laws of nature, and of reason.

To you, my own little boys, every moment of whose lives I would have "jeweled with a joy," knowing beyond the peradventure of a doubt, that herein I am right, I make the plea that each one of you may cherish, and be guided by that ideal.

Early marriage—twenty-one to twenty-five—is best. Late marriage is not quite as nature designed; and, unless conditioned by some special reasons, bachelor life, for a man or woman is, compared to the more natural state, like a flower of duller shades and fainter perfume.

I here record appreciation and thanks to those friends and colleagues whose criticism and suggestions have been helpful.

Especially am I grateful to my associate and friend, Dr. Dwight S. Moore, whose wide experience and attainments have been of material aid in the completion of this booklet.

V. SUPPLEMENTARY

The workings of the human mind have attracted the attention of philosophers and scientists from the earliest times.

Reference has frequently been made to the influence of **mental states** upon the sexual, and other functions; here it may not be amiss to review some features of mental processes, in relation to **emotions, mental** habits, and the **personality,** with which the sexual manifestations are so intimately interwoven.

A child is born with its nervous system, of which the **brain** is the great centre, practically complete; but it is devoid of mental experience.

The **instincts** are inherent tendencies.

At birth, with the first sensation of contact with a cold world, and the first gasp of breath, mental life begins.

Every subsequent sensation of touch, pain, temperature, sight, hearing, smell,

taste and the sensations originating within the body, are registered in the brain.

These **sense impressions** are interpreted, analyzed and associated into **ideas.** Ideas are associated, and elaborated into **judgments.**

The **will,** acting upon **judgements,** determines **action.**

These processes are called **thinking.**

Conscious **memory** is the knowledge of facts previously experienced, and recalled as such.

In a wider sense, **memory** is the faculty by which all sensations and reactions are registered upon the organism (chiefly the brain), and have a definite influence upon future activities. In other words, every new sensation and reaction is added to the previous store of knowledge and experience, and inevitably exercises influence upon future actions.

The sum total of sensations, thinking, and actions, and the awareness of these, is called consciousness.

The realization that the conscious experiences belong to one's own body, coupled

with memories of past experiences, and anticipations for the future, makes up the **personality**, or **individuality.**

Accompanying the activities of consciousness is that subtle something which is called **feeling**, or **emotion**; and this may be either pleasant or unpleasant; agreeable or disagreeable. Examples: Fear, anger, pain, joy, sorrow, anxiety, worry, satisfaction, disappointment, etc.

Feeling, or **emotion**, arises:

I. In connection with sensations received through the sense organs, as sight, hearing, taste, pain, etc.

II. In connection with the intellectual phase of desire, and of what is right or wrong in conduct and character.

The power of moral discrimination is called **conscience.**

Every shade of **emotion** has a significance, a **definite effect upon bodily functions**, and a definite influence in shaping the mental status, thinking and conduct.

Generally speaking, those things which are helpful, constructive, tending to preser-

vation of the individual and the race, produce pleasant or agreeable feelings.

Those which are harmful, destructive, tending to extinction, produce unpleasant, disagreeable or painful feelings. Hence emotions serve as indicators, or guides to action; one instinctively seeks that which is **pleasant**, and shuns that which is **unpleasant.**

But human beings may not follow the pure dictates of nature, where that course comes in conflict with contingencies imposed by social environment.

It may be remarked that the impulses of instinct, which in all animals tend to definite predetermined reactions, become **modifiable** in proportion to the development of **brain functions.** The grade of brain development is reflected by the degree of training of which an animal is capable, and by the complexity of **emotional** manifestation.

Not until **man's** level is reached are the native impulses held, in a measure, subservient to abstract reasoning, and the **ethical, altruistic** manifestations made possible.

The child, unhampered by knowledge or necessity, follows impulses of the **natural in-**

stincts. As time goes on, its store of knowledge and experience increases; the power of reasoning develops more and more; conscience comes into being (and is always modified by training and surrounding influences); and so he learns to control the natural impulses, more or less.

It is common experience that success in pursuit of desire is accompanied by pleasurable emotions of satisfaction, contentment, etc., while failure causes feelings of dissatisfaction and depression.

In all moral questions of right and wrong, conscience stands an uncompromising censor—thoughts or conduct, in harmony with right, being approved by the censor, give pleasurable emotions of well being, elation, pride, etc.

Thoughts or conduct, out of harmony with the right, are accompanied by feelings of self-reproach, shame, dejection, etc.

Emotions affect the individual in proportion to their intensity and duration.

Unlike the emotions arising from the sense organs, which are brief or of momentary duration, the emotions of intellectual

origin—especially disagreeable ones—are apt to be prolonged, and may be continued indefinitely as memories.

It should be stated that nature is liberal, and allows a wide latitude for the harmless play of emotions; they can be injurious only when violently manifested, or when prolonged by a fostering indulgence into a habit of mind, such as anxiety, worry, fear, etc.

Long continued anxiety, worry, fear, have direct and baneful effects upon all bodily functions, as digestion, circulation, and the vital chemistry of body changes; and are accountable for a vast deal of invalidism, suffering and inefficiency. Whereas, cheerful, hopeful mental states have opposite, beneficial effects.

It is a fundamental law of nature that all mental reactions are made easier by repetition, and tend to become established as habits of thought.

Obviously then, one may control to a considerable extent, the occurrence of emotions and formation of mental habits:

I. By choosing one's environment and associates.

There is nothing lost in nature; every stimulus or influence that reaches the organism has an effect which is conditioned by the individual's habitual **frame** of **mind**; hence

II. By directing one's **thoughts**, and setting up **ideals** in harmony with the dictates of **wisdom.**

If the "wisdom of man can be measured by his foresight," it is wise to look ahead and **anticipate** human events by taking a course that makes for **pleasant emotions** and **good habits** of **mind**—avoiding that which is antagonistic.

If vicious **habits** have already been formed the principle of conduct should be to **replace** them; and this is accomplished best by **employing one's time in wholesome pursuits.**

Physical exercise in the shape of **work** is the one most effective **preventive** of bad habits of mind and body; and the most potent **corrective** of habits already formed.

The physical work promotes healthful functioning of the body, and the unconsciously enforced participation of the mind precludes the possibility of indulging in un-

productive or vicious day dreaming, and develops **decision** of **purpose** through the **discipline.**

Cultivate a cheerful attitude.

Look at the bright side.

Avoid a too serious view of life.

Cherish clean ideals.

Let desire be legitimate, and for that which one may reasonably hope to attain.

Remember that right conduct only issues from the desire to do right.

The mistakes and failures which attend honest effort are not occasions for vain regrets. Rather are they to be regarded as incidents on the road to ultimate success—as necessary materials in the building of strong character.

For many reasons, natural and social, which must be obvious to all, the **sexual instinct** is peculiarly productive of **emotions,** and plays a paramount role in the formation of **character.** It is the **center** around which revolve the most compelling desires, the dearest hopes, the darkest despair, and the serenest happiness of life.

In the light of the simple facts of body, and mind, as set forth in this volume, one may choose happiness or sorrow, much as he will.

He may elect to be a spendthrift, and dissipate the splendid gifts bestowed upon him by nature; or he may wisely conserve the sweets—not only that he might enjoy the normal functions of his body all his days, but that he may pass on to posterity fit candidates for the **Aristocracy of Heredity**—the only aristocracy worth while.

As man is, largely, a **bundle** of **habits**, the mind may be compared to a garden; good habits to flowers; bad habits to weeds.

That one may develop this garden it is necessary, first of all, to learn to distinguish the weeds from the flowers, not only when they are full grown, but especially while they are yet young—and to distinguish the seed.

Weeds grow without cultivation, and are hardy; flowers require cultivation, and are less hardy, until deeply rooted.

The most effective and useful time to cultivate is in the springtime.

The chief task is to overcome the weeds —all else is easy.

When the garden is once started right, comparatively little attention will keep the weeds out; and the flowers will grow, and bloom in the fullness of their fragrance and beauty.

SEP 0 1918

HQ 36 M277s 1918

02410660R

NLM 05016319 7

NATIONAL LIBRARY OF MEDICINE